FROM : JOE ZHENG/SUPA

FAX NO. :4088739249

May. 17 2004 05

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RECEIVED CENTRAL FAX CENTER

MAY 1 7 2004

Applicant(s):

Kyunam Kim

Title:

Graphic chatting with organizational avatars

Serial No.:

09/732,628

Confirmation No.: 8874

Group Art Unit:

Filing Date:

12/08/2000

Examiner:

Kieu D. Vu

Docket No:

2173

M-8786 US

May 16, 2004

Mail Stop: Non-Fee Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

## Response to First Office Action

Dear Sir:

In response to the Office Action dated 01/15/2004, the Applicant respectfully requests a one-month extension to respond to this Office and the undersigned authorizes the Commissioner to charge Deposit Account No.: 502436 (Small Entity, Order No.; M-8786) for such request. Assuming the request for the extension is granted, the Office Action may be responded to no later than 05/17/2004 as 05/15/2004 falls on Saturday.

Amendments are made to the claims. The Examiner is respectfully requested to reconsider the pending claims after entering the amendments.

AMENDMENTS TO THE CLAIMS are reflected in the listing of claims which begins on page 2 of this Response.

REMARKS begin on pag 14 of this L tter

Page 1 of 19

PAGE 5/23 \* RCVD AT 5/17/2004 8:53:37 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-1/0 \* DNIS:8729306 \* CSID:4088739249 \* DURATION (mm-ss):07-04

08/12/2004 BHILLIAR 00000001 502436 09732628

01 FC:2251

55.00 DA

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

.cation or Docket Number									
/-									

09/732628

CLAIMS AS FILED - PART I							9	SMALL ENTITY		OTHER THAN		
		(Column 1)		(Column 2)		1	TYPE		OR	SMALL ENTITY		
TOTAL CLAIMS								RATE	FEE		RATE	FEE
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			7 / minus 20=		• 51			X\$ 9=		OR	X\$18=	918
INDEPENDENT CLAIMS			3 minus 3 =		2			X40=		OR	<b>X8</b> 0=	160
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2		TOTAL		OR	TOTAL	1788
CLAIMS AS AMENDED - PART II								•		,	OTHER	THAN
577-04 (Column 1) (Column					(Column 3)	_	SMALL E	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 70	Minus	**	7/	= /		X\$ 9=		OR	X\$18=	
	Independent	. 3	Minus	***	5	= /		X40=		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF M				JPV -	j	+135=		OR	+270=	
DEST AVAILABLE COPY						<b>J</b>	į	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,	
AMENDMENT B		CLAIMS REMAINING AFTER		HIGI NUN	HEST MBER IOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
		AMENDMENT		PAID	FOR	<del> </del>	1		FEE			FEE
ON:	Total	•	Minus	**		=	-	X\$ 9=		OR	X\$18=	
AME	Independent	• NTATION OF MI	Minus	***	T CL AIM	-	┨	X40=		OR	X80=	
	FIRST PRESE	NIAHON OF MI	DETIFIE DEF	CHOCK	CLAN		_	+135=		OR	+270=	
							,	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3	<u> </u>					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST MBER IOUSLY OFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**	· 	=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	]	X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								070	1		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								OR	+270= TOTAL			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FFF									OR	ADDIT. FEE		
	""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											